## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for

maintenance fee notifica	tions.	nerwise in block i, by	(a) specifying a new con	espondence address	, and or (	o) indicating a sepa	raic "FEE ADDRESS" IC
CURRENT CORRESPOND	Fe	Note: A certificate of mailing can only be used for domestic mailings of the Fec(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, mushave its own certificate of mailing or transmission.					
26079	7590 11/0:	2/2009	ha	ve its own certificat	e of maili	ng or transmission.	
CONVATEC I 100 HEADQUA SKILLMAN, N.	1 F St ad tra	Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.					
				Stuart E.	Krieg	ger ,	(Depositor's name)
				Stua	It E.	Kriege	(Signature)
				December	10, 2	009	(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.		CONFIRMATION NO.
10/715,730 11/18/2003			George F. Fattman	CV0326 NP 4899			
TITLE OF INVENTION: OSTOMY POUCH ATTACHMENT ADHESIVES RESISTANT TO STOMAL EFFLUENT							
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSU	E FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	<b>\$</b> 1510	\$300	\$0		\$1810	02/02/2010
EXAM	INER	ART UNIT	CLASS-SUBCLASS				
CHAPMAN, GINGER T		3761	604-344000				
1. Change of corresponde CFR 1.363).  ☐ Change of corresponde CFR 1.363 in the Correspondence of corr		2. For printing on the patent front page, list     (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,					
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME AT	ND RESIDENCE DATA	TO BE PRINTED ON 1	THE PATENT (print or ty	pe)			
PLEASE NOTE: Unle recordation as set forth	ess an assignee is identi i in 37 CFR 3.11. Comp	fied below, no assignee letion of this form is NO	data will appear on the p T a substitute for filing an	patent. If an assigned assignment.	ee is ident	tified below, the doc	current has been filed for
(A) NAME OF ASSIGNEE			(B) RESIDENCE: (CITY and STATE OR COUNTRY)				
Bristol-Myers Squibb Company			New York, NY, US Reel/Frame: 014715/0192				
Please check the appropris	ate assignee category or	categories (will not be pr	inted on the patent):	Individual 🖾 Co	rporation	or other private grou	p entity Government
4a. The following fee(s) a    Ssue Fee	re submitted:	b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)					
	o small entity discount po	☐ A check is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached.					
Advance Order - # of Copies			The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 023869 (enclose an extra copy of this form).				
5. Change in Entity State	us (from status indicated SMALL ENTITY status		b. Applicant is no lon	ger claiming SMAI	LENTITY	Y status See 37 CFD	1 27(9)(2)
NOTE: The Issue Fee and	Publication Fee (if requ	ired) will not be accepted	from anyone other than t	he applicant; a regis	tered attor	ney or agent; or the	assignee or other party in
nterest as shown by the re Authorized Signature	Sunt	Es Patent and Trademark	Office.			per 10, 2009	
	Stuart E.	Krieger	<b>-1</b>	Registration No			731
his collection of informat	tion is required by 27 CE	D 1 211 The information	a is comired to sheets				
his collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) n application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and ubmitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete his form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.							
Inder the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.							